Case 21-32079-KLP Doc 1 Filed 07/01/21 Entered 07/01/21 13:06:17 Desc Main Document Page 1 of 50

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	your pictu exar licer	e the name that is on government-issued are identification (for nple, your driver's ase or passport).	Christopher First name M. Middle name		First name Middle name
	iden	g your picture tification to your ting with the trustee.	Wells Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years			
		ide your married or den names.			
3.	you num Indi	the last 4 digits of r Social Security sber or federal vidual Taxpayer tification number	xxx-xx-5684		

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Debtor 1 Christopher M. Wells

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	2830 McManaway Dr.	If Debtor 2 lives at a different address:
		Midlothian, VA 23112 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Chesterfield	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Page 3 of 50 Document Debtor 1 Christopher M. Wells Case number (if known) Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. E.D. VA / Chapter 7 When 5/08/13 District Case number 13-32554 District When Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Relationship to you Debtor When Case number, if known District Do you rent your Go to line 12. No.

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

No. Go to line 12.

this bankruptcy petition.

residence?

☐ Yes.

Case 21-32079-KLP Doc 1 Filed 07/01/21 Entered 07/01/21 13:06:17 Desc Main Document Page 4 of 50 Debtor 1 Christopher M. Wells Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time □ No. Go to Part 4. business? Name and location of business Yes. A sole proprietorship is a business you operate as **Trigger Happy Firearms** an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC 11302 Hull Street Road If you have more than one Midlothian, VA 23112 sole proprietorship, use a Number, Street, City, State & ZIP Code separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, Bankruptcy Code, and are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or

Number, Street, City, State & Zip Code

Where is the property?

livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Christopher M. Wells

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Christopher M. We	ells		Case num	nber (if known)		
Par	t 6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	individual primarily for a pe	consumer debts? Consumer debts are described and consumer debts are described and consumer debts are described and consumer debts."	lefined in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		business debts? Business debts are debts are debts are debts are debts. The business debts are debts.			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	u owe that are not consumer debts or busin	ness debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapt				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7 are paid that funds will be	7. Do you estimate that after any exempt po available to distribute to unsecured creditors	roperty is excluded and administrative expenses ors?		
	administrative expenses are paid that funds will be available for		□ No				
			☐ Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	■ 1-49		☐ 1,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99)	☐ 5001-10,000	□ 50,001-100,000		
	owe?	□ 100-1	99	□ 10,001-25,000	☐ More than100,000		
		□ 200-9	99				
19.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	\$50,0	01 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion		
		□ \$500,	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	\$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	□ \$50,0	001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
			001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
		□ \$500,	.001 - \$1 million	□ \$100,000,001 - \$500 million	imore than \$50 billion		
Par	t 7: Sign Below						
For	you	I have ex	camined this petition, and I d	declare under penalty of perjury that the inf	formation provided is true and correct.		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		bankrupt and 3571	cy case can result in fines u 1.	ent, concealing property, or obtaining mone up to \$250,000, or imprisonment for up to 2	ey or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Christo	stopher M. Wells pher M. Wells e of Debtor 1	Signature of Del	otor 2		
		Executed	d on July 1, 2021	Executed on			
			MM / DD / YYYY		MM / DD / YYYY		

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Debtor 1 Christopher M. Wells Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Bruce \	W. White	Date	July 1, 2021
Signature of	Attorney for Debtor		MM / DD / YYYY
Bruce W. V	White		
Printed name			
	White, P.C. (VA Bar No. 19840)		
Firm name			
8550 Mayl	and Drive		
Suite 206			
Henrico, V	/A 23294		
Number, Street,	City, State & ZIP Code		
Contact phone	(804) 288-4328	Email address	brucewwhite@gmail.com
19840 VA			
Bar number & S	tate		

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			i age e e. ee	
Fill in this infor	mation to identify your	case:		
Debtor 1	Christopher M. W	/ells		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA	
Case number				
(if known)				Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
		Your as Value of	s sets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	50,668.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$	50,668.00
Par	t 2: Summarize Your Liabilities		
		Your lia Amount	bilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
i.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	26,963.0
	Your total liabilities	\$	26,963.00
Par	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,000.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,344.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Christopher M. Wells Case number (if known)

3. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,091.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Documer	nt Page 10 of 50		
Fill in this infor	mation to identify you	case and this filing:			
Debtor 1	Christopher M. \	Vells			
	First Name	Middle Name	Last Name	-	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	-	
	ankruntov Court for the	EASTERN DISTRICT OF	VIRGINIA		
Officed States Do	ankiupicy Court for the.	EASTERN DISTRICT OF	VIIOINIA	-	
Case number					
					amended filing
Ο#: -: - I - -	400 A /D				
_	orm 106A/B				
Schedul	e A/B: Prop	perty			12/15
think it fits best. E information. If moi Answer every que	Be as complete and accur re space is needed, attack stion.	ate as possible. If two married n a separate sheet to this form	ce. If an asset fits in more than one categor people are filing together, both are equally . On the top of any additional pages, write year	responsible for supply	ying correct
1 Do you own or	have any legal or equitab	le interest in any residence, bu	uilding, land, or similar property?		
•		io intologi in any logidonos, se	manig, land, or ominar property.		
No. Go to Pa					
☐ Yes. Where	is the property?				
Part 2: Describe	Your Vehicles				
			cles, whether they are registered or no e G: Executory Contracts and Unexpired		les you own that
3. Cars, vans, tr	ucks, tractors, sport u	tility vehicles, motorcycles	3		
■ No					
□ Yes					
00					
			al vehicles, other vehicles, and accessories, snowmobiles, motorcycle accessories		
■ No					
☐ Yes					
5 Add the dollar	ar value of the portion	you own for all of your ent	ries from Part 2, including any entries	for	40.00
pages you h	ave attached for Part 2	. Write that number here		=>	\$0.00
Part 3: Describe	Your Personal and Hou	sahald Itams			
		table interest in any of the	following items?	Cur	rent value of the
				Do r	tion you own? not deduct secured ms or exemptions.
	oods and furnishings ajor appliances, furnitur	e, linens, china, kitchenware			
Yes. Desc	ribe				
	Househa	ld furnishings including	bedroom furniture; living area	\neg	
	furniture	ia iurinaminga menuding	, bearoom runniture, living area		
	kitchen a	nd dining room; small a	appliances; rugs; linens; china;		\$2,500.00

Official Form 106A/B Schedule A/B: Property page 1

Case 21-32079-KLP Doc 1 Filed 07/01/21 Entered 07/01/21 13:06:17 Page 11 of 50 Document Case number (if known) Debtor 1 Christopher M. Wells 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... TVs; DVRs; VCRs; Stereo equipment; cell phones and other \$1,500.00 electronic equipment 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... Sporting Equipment, including golf clubs and odds and ends \$500.00 Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... \$3,500.00 Firearms - personal rifles, shotguns and pistols Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$1,000.00 Clothing; jewelry 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... Examples: Dogs, cats, birds, horses □ No

13. Non-farm animals

Yes. Describe.....

Family Pets - 1 dog

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$9,010.00

Part 4: Describe Your Financial Assets

\$10.00

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De	btor 1	Christopher M.	Well	S		Ca	ase number (if known)	
									portion you own? Do not deduct secured claims or exemptions.
	□ No [′]	, ,	,	our wallet, in your home, ir	•	ox, and on hand wh	nen you file yo	our petition	
							Cash		\$600.00
	Example □ No	•	•	r other financial accounts; ve multiple accounts with t	the same institution	n, list each.		J	ses, and other similar
			17.1.	Personal Checking	Atlantic Union				\$528.00
			17.2.	Business Checking		Bank Accounts	s including		\$4,630.00
			17.3.	Personal Checking	Funds in ALL Union Bank	Bank Accounts	s including		\$1.00
	□ No ■ Yes		-	Institution or issuer name: Stocks, Bonds, Mutua [none known]					\$0.00
	Non-pu joint ve □ No		k and	interests in incorporated	d and unincorpor	ated businesses,	including ar	n interest in	an LLC, partnership, and
	Yes.	Give specific inform		about them ne of entity:		o,	% of ownersh	ip:	
			Ha inv	erest in sole proprieto ppy Firearms entory valued @ \$30, nk Account balance a	950 as of June,	2021			
			\$4,	630			100%	%	\$30,950.00
	Negotia Non-ne ■ No	able instruments inc	clude p ts are	nds and other negotiable personal checks, cashiers' those you cannot transfer about them	checks, promisso	ory notes, and mone			
				uer name:					
	Exampl □ No		, ERIS	SA, Keogh, 401(k), 403(b),	, thrift savings acc	ounts, or other per	nsion or profit	-sharing plar	าร
	Yes. L	ist each account s		ely. of account:	Institution name:				

Official Form 106A/B Schedule A/B: Property page 3

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Case number (if known) Debtor 1 Christopher M. Wells **Retirement Plan** \$0.00 [Not property of bankruptcy estate] 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses □ No Yes. Give specific information about them... \$1.00 ATF license Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2021 and prior years Federal Tax Refund 2020 tax refund - \$4,948 [not yt **Federal** \$4,948.00 received] 2021 and prior years Federal Tax Refund 2020 tax refund - no refund \$0.00 State 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

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Debtor 1 Christopher M. Wells	Document	Page 14 of 50 Case number (if known)	
30. Other amounts someone owes you Examples: Unpaid wages, disability benefits; unpaid loans y		fits, sick pay, vacation pay, workers' compe	nsation, Social Security
■ Yes. Give specific information			
	Unpaid Wages		\$0.00
31. Interests in insurance policies Examples: Health, disability, or life □ No	insurance; health savings account (F	ISA); credit, homeowner's, or renter's insurar	nce
Yes. Name the insurance compar	ny of each policy and list its value. any name:	Beneficiary:	Surrender or refund value:
Bure	Insurance Policy with Farm au m and 1 whole life policy		\$0.00
someone has died. ■ No □ Yes. Give specific information 33. Claims against third parties, whe	trust, expect proceeds from a life ins	eurance policy, or are currently entitled to rec	eive property because
Examples: Accidents, employment ■ No □ Yes. Describe each claim	disputes, insurance claims, or rights	to sue	
34. Other contingent and unliquidate ☐ No ☐ Yes. Describe each claim	d claims of every nature, including	counterclaims of the debtor and rights to	set off claims
	acquires within 180 days of bequest, devise or inheritar	at the Debtor presently has or f the filing of this petition from a nce, as a result of a separation or eficiary of a life insurance policy	\$0.00
35. Any financial assets you did not a ■ No □ Yes. Give specific information	already list		
	ur entries from Part 4, including an re	y entries for pages you have attached	\$41,658.00
Part 5: Describe Any Business-Related R	Property You Own or Have an Interest In	n. List any real estate in Part 1.	
37. Do you own or have any legal or equita	able interest in any business-related pro	operty?	
No. Go to Part 6.			
Yes. Go to line 38.			
Part 6: Describe Any Farm- and Commer If you own or have an interest in far	rcial Fishing-Related Property You Own mland, list it in Part 1.	or Have an Interest In.	
46. De veu eur er beve env legel er	aguitable interest in any form or a	ommercial fiching related property?	

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No. Go to Part 7.

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Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$50,668.00

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Fill in this information to identify your case:					
Debtor 1					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA		
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Household furnishings including bedroom furniture; living area	\$2,500.00	-	\$2,500.00	Va. Code Ann. § 34-26(4a)
furniture kitchen and dining room; small appliances; rugs; linens; china; pictures Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Household furnishings including bedroom furniture; living area	\$2,500.00		\$1.00	Va. Code Ann. § 34-4
furniture kitchen and dining room; small appliances; rugs; linens; china; pictures Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
TVs; DVRs; VCRs; Stereo equipment; cell phones and other electronic	\$1,500.00		\$1,500.00	Va. Code Ann. § 34-26(4a)
equipment Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
TVs; DVRs; VCRs; Stereo equipment; cell phones and other electronic	\$1,500.00		\$1.00	Va. Code Ann. § 34-4
equipment Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on	Current value of the	Amo	ount of the exemption you claim	Specific laws that allow exemption
Schedule A/B that lists this property	portion you own Copy the value from			
Sporting Equipment, including golf	\$500.00		\$1.00	Va. Code Ann. § 34-4
clubs and odds and ends	Ψοσο.σσ	_		
Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	
Firearms - personal rifles, shotguns and pistols	\$3,500.00		\$3,000.00	Va. Code Ann. § 34-26(4b)
Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
Firearms - personal rifles, shotguns and pistols	\$3,500.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
Clothing; jewelry Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	Va. Code Ann. § 34-26(4)
LINE HOTH SURBULIE AVD. 11.1			100% of fair market value, up to any applicable statutory limit	
Clothing; jewelry Line from Schedule A/B: 11.1	\$1,000.00		\$1.00	Va. Code Ann. § 34-4
Line Ironi Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Family Pets - 1 dog Line from Schedule A/B: 13.1	\$10.00	•	\$10.00	Va. Code Ann. § 34-26(5)
Ellie Holli Golloddio 772. 1911			100% of fair market value, up to any applicable statutory limit	
Family Pets - 1 dog Line from Schedule A/B: 13.1	\$10.00		\$1.00	Va. Code Ann. § 34-4
Line nom Schedule Arb. 13.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from <i>Schedule A/B</i> : 16.1	\$600.00		\$1.00	Va. Code Ann. § 34-4
Line nom <i>Schedule AVB</i> . 10.1			100% of fair market value, up to any applicable statutory limit	
Personal Checking: Funds in ALL Bank Accounts including	\$528.00		\$1.00	Va. Code Ann. § 34-4
Atlantic Union Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Business Checking: Funds in ALL Bank Accounts including Union Bank	\$4,630.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Personal Checking: Funds in ALL Bank Accounts including Union Bank	\$1.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	

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De	btor 1 Christopher M. Wells			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Stocks, Bonds, Mutual Funds [none known]	\$0.00		\$1.00	Va. Code Ann. § 34-4
	Line from Schedule A/B: 18.1			100% of fair market value, up to any applicable statutory limit	
	Interest in sole proprietorship known as Trigger Happy Firearms	\$30,950.00		\$1.00	Va. Code Ann. § 34-4
	inventory valued @ \$30,950 as of June, 2021 Bank Account balance as disclosed			100% of fair market value, up to any applicable statutory limit	
	above at \$4,630 100% Line from <i>Schedule A/B</i> : 19.1				
	Retirement Plan [Not property of bankruptcy estate]	\$0.00		\$1.00	Va. Code Ann. § 34-4
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	Retirement Plan [Not property of bankruptcy estate]	\$0.00		\$1.00	Va. Code Ann. § 34-34
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	Retirement Plan [Not property of bankruptcy estate]	\$0.00			504 U.S. 753 (1991) Not property of the bankruptcy
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	estate under Patterson v. Shumate
	ATF license Line from Schedule A/B: 27.1	\$1.00		\$1.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	Federal: 2021 and prior years Federal	\$4,948.00		\$1.00	Va. Code Ann. § 34-4
	2020 tax refund - \$4,948 [not yt received] Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Federal: 2021 and prior years Federal Tax Refund	\$4,948.00		\$1.00	Va. Code Ann. § 34-26(9)
	2020 tax refund - \$4,948 [not yt received] Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Line from Schedule AVB: 20.1				
	State: 2021 and prior years Federal Tax Refund	\$0.00		\$1.00	Va. Code Ann. § 34-4
	2020 tax refund - no refund Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit	
	Unpaid Wages Line from Schedule A/B: 30.1	\$0.00		\$1.00	Va. Code Ann. § 34-29
	LINE HOTH SCHEUUIE AVD. 30.1			100% of fair market value, up to any applicable statutory limit	

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or 1 Christopher M. Wells		Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Jnpaid Wages	\$0.00	\$1.00	Va. Code Ann. § 34-4
ine from <i>Schedule A/B</i> : 30.1		100% of fair market value, up to any applicable statutory limit	
Life Insurance Policy with Farm	\$0.00	■ \$1.00	Va. Code Ann. §§ 38.2-312 38.2-3123
term and 1 whole life policy ine from Schedule A/B: 31.1		☐ 100% of fair market value, up to any applicable statutory limit	
Life Insurance Policy with Farm	\$0.00	■ \$1.00	Va. Code Ann. § 34-4
term and 1 whole life policy ine from Schedule A/B: 31.1		☐ 100% of fair market value, up to any applicable statutory limit	
Life Insurance Policy with Farm	\$0.00	■ 100%	Va. Code Ann. § 38.2-3122
I term and 1 whole life policy ine from Schedule A/B: 31.1		☐ 100% of fair market value, up to any applicable statutory limit	
Any interest in property that the Debtor presently has or acquires	\$0.00	■ \$1.00	Va. Code Ann. § 34-13
within 180 days of the filing of this petition from a bequest, devise or inheritance, as a result of a separation or divorce decree, or as a peneficiary of a life insurance policy or death Line from Schedule A/B: 34.1		☐ 100% of fair market value, up to any applicable statutory limit	
any interest in property that the Debtor presently has or acquires	\$0.00	■ \$1.00	Va. Code Ann. § 34-4
within 180 days of the filing of this petition from a bequest, devise or inheritance, as a result of a separation or divorce decree, or as a peneficiary of a life insurance policy or death cline from Schedule A/B: 34.1		□ 100% of fair market value, up to any applicable statutory limit	
Any Personal Injury or Wrongful	\$0.00	100%	Va. Code Ann. § 34-28.1
Death Claims pending or to be claimed ine from Schedule A/B: 53.1		100% of fair market value, up to any applicable statutory limit	
	\$0.00	1.00	Va. Code Ann. § 34-4
claimed		☐ 100% of fair market value, up to any applicable statutory limit	
Any Personal Injury or Wrongful Death Claims pending or to be claimed Line from Schedule A/B: 53.1 Are you claiming a homestead exemption Subject to adjustment on 4/01/22 and every solution in the property covered to the	of more than \$170,35 3 years after that for ca	100% of fair market value, up to any applicable statutory limit	t.)

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Fill in this infor	mation to identify your	case:		
Debtor 1	Christopher M. W	/ells		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Fill in this info	rmation to identify your	case:				
Debtor 1	Christopher M. W	alls				
Debior 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Sankruptcy Court for the:	EASTERN DISTRICT OF V	IRGINIA			
Case number						heck if this is an
(mended filing
					~	monaca ming
Official For	m 106E/F					
Schedule	E/F: Creditors W	ho Have Unsecure	d Claims			12/15
Schedule G: Exec Schedule D: Cred left. Attach the Co name and case n	cutory Contracts and Unexp litors Who Have Claims Sec	that could result in a claim. Alsired Leases (Official Form 1060 ured by Property. If more space ge. If you have no information to	i). Do not include is needed, copy	any creditors with partially the Part you need, fill it out	secured claims number the en	that are listed in tries in the boxes on the
	itors have priority unsecure					
_ ′	, ,	u ciaiiis agailist you?				
■ No. Go to	Part 2.					
☐ Yes.						
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims				
☐ No. You h ☐ Yes. 4. List all of yo	ur nonpriority unsecured cl	art. Submit this form to the court v	f the creditor who	o holds each claim. If a cred		
		y for each claim. For each claim lis ist the other creditors in Part 3.If y				
						Total claim
4.1 Absol	ute Resolutions	Last 4 digits of	account number	2543		\$4,258.00
•	rity Creditor's Name					·
	Bankruptcy Norman Center Dr #35	0 When was the d	obt incurred?	Opened 10/20 Last 03/20	Active	
	nington, MN 55437	When was the d	ebt incurred?	03/20		-
	Street City State Zip Code	As of the date y	ou file, the claim	is: Check all that apply		
Who inc	curred the debt? Check one.					
■ Debt	or 1 only	☐ Contingent				
☐ Debt	or 2 only	☐ Unliquidated				
☐ Debt	or 1 and Debtor 2 only	☐ Disputed				
☐ At le	ast one of the debtors and and	other Type of NONPR	IORITY unsecure	d claim:		
☐ Che	ck if this claim is for a comi	munity	5			
debt				aration agreement or divorce	that you did not	
	aim subject to offset?	report as priority				
■ No		·	·	g plans, and other similar del		
☐ Yes		Other. Specif	Factoring (Company Account Cit	ibank N.A.	-

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Debto	Christopher M. Wells		Case number (if known)	
4.2	Capital One	Last 4 digits of account number	0813	\$10,457.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 07/14 Last Active 3/06/20	
	Who incurred the debt? Check one. Debtor 1 only	•	s. Offeck all that apply	
	Debtor 2 only	☐ Contingent		
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Capital OneBank, NA Nonpriority Creditor's Name	Last 4 digits of account number	8449	\$2,903.00
	c/o Glasser and Glasser Box 3400	When was the debt incurred?	Opened 09/16 Last Active 05/20	
	Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арру	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	l; pending judgment	
4.4	Dicks Sporting Goods Nonpriority Creditor's Name	Last 4 digits of account number		\$982.00
	Synchrony Bank P.O. Box 530916	When was the debt incurred?		
	Atlanta, GA 30353 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	= 1	
		- Other opening		

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Christopher M Wells

Case number (if known)

Debt	Christopher M. Wells		Case number (if known)	
4.5	Kohls/Capital One	Last 4 digits of account number	1279	\$3,173.00
	Nonpriority Creditor's Name Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 10/16 Last Active 10/20	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc	count	
4.6	Nationwide Recovery Sys (James River)	Last 4 digits of account number	1197	\$790.00
	Nonpriority Creditor's Name 501 Shelley Drive Suite 300	When was the debt incurred?	Opened 2/04/21	
	Tyler, TX 75701	_		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Medical		
4.7	Patriot Building, Inc. Nonpriority Creditor's Name	Last 4 digits of account number		\$3,400.00
	2600 Roy Arnold Road Murfreesboro, TN 37130	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane, and other similar debt-	
	■ No	Debts to pension or profit-sharin	iy pians, and other similar debts	
	Yes	Other. Specify		

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Christopher M. Wells	Case number (if known)	
Synchrony Bank	Last 4 digits of account number	\$1,000.0
Nonpriority Creditor's Name		
P.O. Box 960061	When was the debt incurred?	
Orlando, FL 32896	_	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Credit Card Purchases	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6a.	Obligations arising out of a separation agreement or divorce that		
IIOIII I ait 2	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 26,963.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 26,963.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this information to identify your case:								
Debtor 1	Christopher M. W	/ells						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA					
Case number								
(if known)								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Walter Stylis
11300 Hull Street Road
Midlothian, VA 23112

State what the contract or lease is for

Lease of commercial building; Debtor to remain in possession and pay monthly payment

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Fill in this	information to identify your	case:	nt 1 age 20 0	1 00	
Debtor 1	Christopher M. W	ells			
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA		
Case numb	ber				☐ Check if this is an
	I Form 106H Iule H: Your Cod	ebtors			amended filing 12/15
people are fill it out, a your name	filing together, both are equal number the entries in the and case number (if known) you have any codebtors? (If you	ally responsible for sup boxes on the left. Attacl . Answer every question	olying correct informati n the Additional Page to 	ion. If more space is n o this page. On the top	ate as possible. If two married eeded, copy the Additional Page, o of any Additional Pages, write
Arizon No. Yes 3. In Colin line Form	2 again as a codebtor only i	Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guarar	e with you at the time? spouse as a codebtor ator or cosigner. Make s	ngton, and Wisconsin.) if your spouse is filing sure you have listed the	y states and territories include g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
(Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cre	editor to whom you owe the debt
_	Name Number Street City	State	ZIP Code	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	eine
_	Name			_ ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	ine
	Number Street City	State	ZIP Code		

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	in this information to	o identify your ca Christopher									
	btor 2	Cirristopher	W. Wens			_					
(Spc	buse, if filing)					_					
Uni	ited States Bankrup	tcy Court for the	: EASTERN DISTRICT	OF VIRGINIA		_					
	se number			-			Check if t				
(If Kr	nown)						☐ An an		Ū		
										g postpetition ollowing date:	
<u>O</u>	fficial Form	<u> 1061</u>					MM /	DD/ YY	/ΥΥ		
S	chedule I: `	Your Inc	ome								12/15
atta	ch a separate sheet tt 1: Describe Fill in your emplo	et to this form.	r spouse is not filing w On the top of any additi	onal pages, write yo			d case numb	oer (if k	nown). A	nswer every	
	information.			Debtor 1						ling spouse	
	If you have more than one job, attach a separate page with information about additional		Employment status	■ Employed□ Not employed	_				yed nployed		
	employers.	employers.		Owner							
	Include part-time, self-employed wo		Employer's name	Self employed							
	Occupation may in or homemaker, if		Employer's address	t/a Trigger Hap	py Firea	rms	s				
			How long employed t	here? 9 mont	hs						
Pai	rt 2: Give Det	tails About Mor	nthly Income								
	mate monthly inco		ate you file this form. If	you have nothing to r	eport for	any	line, write \$0	in the s	space. Inc	clude your noi	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co	ombine the informatio	n for all e	mpl	oyers for that	t person	on the lir	nes below. If	you need
							For Debtor	1		otor 2 or ng spouse	
2.			ry, and commissions (b calculate what the month		2.	\$		0.00	\$	N/A	
3.	Estimate and list	t monthly overt	ime pay.		3.	+\$	(0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	0.0	00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

5. L	·	y line 4 here			For	Debtor 1		F			
5. L	List	y line 4 here							Debtor 2 on- n-filing spo		
5			4.		\$	C	.00	\$	i-iiiiig spc	N/A	
5		all payroll deductions:									
5	ou.	Tax, Medicare, and Social Security deductions	5	а	\$.00	\$		N/A	
5	5b.	Mandatory contributions for retirement plans		b.	\$_		.00	\$_		N/A	
-	5c.	Voluntary contributions for retirement plans	50		\$_		.00	\$_		N/A	
	5d.	Required repayments of retirement fund loans	50	d.	\$_		.00	\$		N/A	
Ę	5e.	Insurance	56	e.	\$.00	\$		N/A	
5	5f.	Domestic support obligations	5f	f.	\$	0	.00	\$		N/A	
5	5g.	Union dues	5	g.	\$_	0	.00	\$		N/A	
5	5h.	Other deductions. Specify:	_ 5I	h.+	\$_	0	.00	+ \$_		N/A	
6. <i>I</i>	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0	.00	\$		N/A	
7. C	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	0	.00	\$_		N/A	
	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
,	01	monthly net income.		a.	\$_		.00	\$_		N/A	
	8b.	Interest and dividends	81	b.	\$	0	.00	\$		N/A	
c	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	^	\$	•	.00	\$		N/A	
۶	8d.	Unemployment compensation		d.	\$_		.00	\$_		N/A	
	8e.	Social Security	86		\$-		.00	\$_		N/A	
8	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f	f.	\$	O	.00	\$		N/A	
8	8g.	Pension or retirement income	_ 8(g.	\$	0	.00	\$		N/A	
		Net Average Income from			_	4 000				NI/A	
8	8h.	Other monthly income. Specify: Business (year to date)	_ 8I	h.+	· —	1,000		+ \$_		N/A	
		Expected Increase in Business Income	_		\$_	4,000	.00	\$_		N/A	
9. <i>A</i>	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	5,000	.00	\$_		N/A	
10. (Calc	culate monthly income. Add line 7 + line 9.	10.	\$		5,000.00	+ \$		N/A =	\$	5,000.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	' -		- 14,71	· —	-,
] C [Incluothe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep			•			Schedule J. 11. +		0.00
٧		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							. 12. \$		5,000.00
										ombin	
ı	Doy ■	you expect an increase or decrease within the year after you file this form' No. Yes. Explain:	?						m	onthly	income

Official Form 106l Schedule I: Your Income page 2

						1		
Fill	n this informa	tion to identify yo	our case:					
Debt	tor 1	Christopher	M. Wells				k if this is:	
Debt (Spo	tor 2 ouse, if filing)							ving postpetition chapter the following date:
Unite	ed States Bankr	ruptcy Court for the	EASTE	RN DISTRICT OF VIRGIN	IA	ī	MM / DD / YYYY	
	e number nown)							
Of	ficial Fo	rm 106J						
Sc	chedule	J: Your l	Exper	ises				12/1
Be a	as complete a	and accurate as	possible eded, atta	. If two married people ar				
Part	1: Descri	ribe Your House	hold					
1.	No. Go to							
		s Debtor 2 live i	n a separ	ate household?				
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Debte	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state				Doughtor		•	□ No
	dependents	names.			Daughter		9	■ Yes □ No
					Son		11	Yes
								□ No □ Yes
								□ No
2	De veur evr	aanaaa inaluda	_					☐ Yes
3.	expenses o	penses include f people other the	han $_{m \sqcap}$	No Yes				
	yourself and	d your depende	nts? —	100				
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance and		government assistance it is luded it on Schedule I: Y			Your expo	enses
•		,						
4.		or home owners and any rent for the		ses for your residence. In or lot.	nclude first mortgage	e 4. \$		0.00
	If not include	led in line 4:						
		estate taxes				4a. \$		0.00
		rty, homeowner's				4b. \$		0.00
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. \$ 4d. \$		0.00
5.				our residence, such as ho	me equity loans	5. \$	-	0.00

Debtor	1 Christopher M. Wells Ca	ase num	ber (if known)	
6. U	tilities:			
6. 6		6a.	\$	175.00
61	•	6b.	· ·	100.00
60		6c.	\$	230.00
60	d. Other. Specify: cable/internet	6d.	\$	230.00
7. F	ood and housekeeping supplies	- 7.	\$	550.00
	hildcare and children's education costs	8.	\$	0.00
9. C	lothing, laundry, and dry cleaning	9.	\$	100.00
	ersonal care products and services	10.	\$	50.00
11. M	edical and dental expenses	11.	\$	10.00
	ransportation. Include gas, maintenance, bus or train fare.		_	400.00
	o not include car payments.	12.	·	400.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	· .	100.00
14. C	haritable contributions and religious donations	14.	\$	0.00
	surance.			
	o not include insurance deducted from your pay or included in lines 4 or 20.	150	¢.	400.00
	5a. Life insurance	15a.		188.00
	5b. Health insurance	15b.	· .	0.00
	5c. Vehicle insurance	15c.	·	178.00
	5d. Other insurance. Specify:	_ 15d.	\$	0.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 20. pecify:	16.	\$	0.00
	estallment or lease payments:	_ 10.	Ψ	0.00
	7a. Car payments for Vehicle 1	17a.	\$	0.00
	7b. Car payments for Vehicle 2	17b.	·	0.00
	7c. Other. Specify: payment to lender for use of vehicle owned by family		·	650.00
	7d. Other. Specify: payment to lender for use of venicle owned by family	17d.	·	0.00
	our payments of alimony, maintenance, and support that you did not report as	_ '''	Ψ	0.00
	educted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	850.00
	ther payments you make to support others who do not live with you.		\$	0.00
	pecify:	19.		
20. O	ther real property expenses not included in lines 4 or 5 of this form or on Schedu	le I: Yo	our Income.	
20	Da. Mortgages on other property	20a.	\$	0.00
20	Db. Real estate taxes	20b.	\$	0.00
20	Oc. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20	Od. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20	De. Homeowner's association or condominium dues	20e.	\$	0.00
21. O	ther: Specify: Miscellaneous	21.	+\$	150.00
р	ets	_	+\$	200.00
	hildren's activities	_	+\$	150.00
	rash	_	+\$	33.00
	alaulata vaur manthly aynanaa	_		
	alculate your monthly expenses		¢.	4 2 4 4 2 2
	2a. Add lines 4 through 21.		\$	4,344.00
	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,344.00
23. C	alculate your monthly net income.			
	Ba. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,000.00
	Bb. Copy your monthly expenses from line 22c above.	23b.		4,344.00
_\	The state of the s	_00.	Ť	7,077100
23	3c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	656.00
	o you expect an increase or decrease in your expenses within the year after you t			
	or example, do you expect to finish paying for your car loan within the year or do you expect your mo odification to the terms of your mortgage?	ortgage	payment to increase	or decrease because of a
_	No.			
L	Yes. Explain here:			

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Fill in 4h	in information to identify your				
	nis information to identify your				
Debtor 1	Christopher M. W	/ells Middle Name	Last Name		
Debtor 2		Wildale Harrie	Edot Hamo		
(Spouse if,		Middle Name	Last Name		
United S	States Bankruptcy Court for the:	EASTERN DISTRICT O	OF VIRGINIA		
Case nu	ımher				
(if known)					Check if this is an
					amended filing
	al Form 106Dec				
Dec	laration About a	an Individual	Debtor's Sc	chedules	12/15
	Sign Below				
Dic	d you pay or agree to pay some	eone who is NOT an atto	rney to help you fill out b	pankruptcy forms?	
_	No				
_	Yes. Name of person			Attach Pankruntov Po	tition Preparer's Notice,
	res. Name of person				ature (Official Form 119)
	der penalty of perjury, I declare t they are true and correct.	that I have read the sum	nmary and schedules file	d with this declaration and	
х	/s/ Christopher M. Wells		X		
	Christopher M. Wells		Signature of	Debtor 2	
	Signature of Debtor 1		-		
	Date July 1, 2021		Date		

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	Lingthin inform											
		nation to identify you										
De	btor 1	Christopher M. \ First Name	Wells Middle Name	Last Name								
1 -	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name								
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA								
	nse number				_	heck if this is an mended filing						
St Be info	as complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for supp additional pages, write you							
	<u> </u>	, , , , ,	nrital Status and Where You	Lived Before								
1.	What is you	r current marital statu	ıs?									
	☐ Married■ Not mar	ried										
2.	During the la	Ouring the last 3 years, have you lived anywhere other than where you live now?										
	■ No □ Yes. Lis	■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.										
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there						
3. stat					ity property state or territory co, Texas, Washington and W							
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ficial Form 106H).								
Pa	rt 2 Explai	n the Sources of You	r Income									
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	Ill businesses, including part-		ndar years?						
	□ No ■ Yes. Fill	I in the details.										
			Debtor 1		Debtor 2							
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)						
	•	of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$6,000.00	☐ Wages, commissions, bonuses, tips							
			Operating a business		☐ Operating a business							

Official Form 107

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Debtor 1 C	hristopher N	1. Wells		Case number (if known)						
		D	Debtor 1		Debtor 2					
		s	cources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)			
For last cale (January 1 to	ndar year: o December 3		Wages, commissions, onuses, tips	\$0.00	☐ Wages, com bonuses, tips	missions,				
			Operating a business		☐ Operating a	business				
	ndar year befo o December 3	1 2010 \	■ Wages, commissions, onuses, tips	\$0.00	☐ Wages, com bonuses, tips	missions,				
			Operating a business		☐ Operating a	business				
List each	-	e gross income		ou received together, list it on the list it on the list it one list i						
		s	ebtor 1 ources of income escribe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)			
Part 3: Lis	st Certain Pay	ments You Ma	ade Before You Filed for I	Bankruptcy						
6. Are eithe □ No.	Neither Deb	otor 1 nor Deb	debts primarily consumer tor 2 has primarily consu rsonal, family, or househol	mer debts. Consumer debt	ts are defined in 11	U.S.C. § 101	(8) as "incurred by an			
	– ·	0 days before Go to line 7.	you filed for bankruptcy, did	d you pay any creditor a tota	al of \$6,825* or mo	re?				
		paid that credi		d a total of \$6,825* or more ts for domestic support obliquis bankruptcy case.						
				s after that for cases filed on	or after the date o	f adjustment.				
Yes			oth have primarily consu you filed for bankruptcy, did	mer debts. d you pay any creditor a tota	al of \$600 or more?	ı				
	□ No.	Go to line 7.								
		include payme	, ,	d a total of \$600 or more and oligations, such as child sup						
Credito	r's Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this pa	ayment for			
Some payme	Creditors Pa	aid Minimum	over last 90 da	ays Unknown	Unknown	☐ Mortgag ☐ Car ☐ Credit C	ard			

☐ Suppliers or vendors

☐ Other__

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Debtor 1 Christopher M. Wells Case number (if known)

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
Citizens One	Monthly for past 6 months and longer	\$650.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other for use of car owned by mother	
7. Within 1 year before you filed for bankrupt Insiders include your relatives; any general pof which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yo g securities; and a	ou are a general partner; corporation ny managing agent, including one fo	
□ No					
Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment	
Jim Karnes	2021	paid	still owe \$0.00	Short torm loan ronaid	
Richmond, VA	2021	\$12,000.00	\$0.00	Short term loan repaid shortly after loan made	
Yes. List all payments to an insider			_		
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name	
mother	monthly at \$650	Unknown	\$0.00	payment car loan of mother for use of car	
Part 4: Identify Legal Actions, Repossession D. Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	tcy, were you a party in ar				
Case title Case number	Nature of the case	Court or agency		Status of the case	
				Status of the case	
Absolute Resolutions Investments vs CHRISTOPHER WELLS 41GV2100095200	CIVIL JUDGMENT	CHESTERFIEL DISTRICT COU	D GENERAL	Pending On appeal Concluded - 4,058.00	

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0.	Within 1 year before you filed for bankru Check all that apply and fill in the details be		vas any of your property repossessed, foreclosed	, garnished, attache	d, seized, or levied?					
	No. Go to line 11.									
	☐ Yes. Fill in the information below.									
	Creditor Name and Address	De	escribe the Property	Date	Value of the					
		E	xplain what happened		property					
1.	within 90 days before you filed for bank accounts or refuse to make a payment bank No		, did any creditor, including a bank or financial ins e you owed a debt?	titution, set off any a	amounts from your					
	☐ Yes. Fill in the details.									
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount					
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, c		vas any of your property in the possession of an a ner official?	ssignee for the ben	efit of creditors, a					
	■ No									
	Yes									
Par	t 5: List Certain Gifts and Contribution	ns								
13.	_	ruptcy,	did you give any gifts with a total value of more the	nan \$600 per person	?					
	No									
	Yes. Fill in the details for each gift.	00	Describe the wife	D-1	Walara					
	Gifts with a total value of more than \$6 per person	00	Describe the gifts	Dates you gave the gifts	Value					
	Person to Whom You Gave the Gift and Address:	i								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?									
	No									
	☐ Yes. Fill in the details for each gift or	contribu	ition.							
	Gifts or contributions to charities that	total	Describe what you contributed	Dates you	Value					
	more than \$600 Charity's Name	1-1		contributed						
	Address (Number, Street, City, State and ZIP Coo	le)								
Par	rt 6: List Certain Losses									
15.	Within 1 year before you filed for bankru or gambling?	uptcy o	r since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,					
	or gambing:									
	No									
	☐ Yes. Fill in the details.									
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss le the amount that insurance has paid. List pending	Date of your loss	Value of property lost					
			nce claims on line 33 of Schedule A/B: Property.							
Par	t 7: List Certain Payments or Transfer	S								
16.	consulted about seeking bankruptcy or	prepar	lid you or anyone else acting on your behalf pay o ing a bankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you					
	□ No									
	Yes. Fill in the details.									
	Person Who Was Paid		Description and value of any property	Date payment	Amount of					
	Address Email or website address		transferred	or transfer was made	payment					
	Person Who Made the Payment, if Not	You		uuo						
Offic	ial Form 107 Sta	atement	of Financial Affairs for Individuals Filing for Bankruptcy		page 4					

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Debtor 1 Christopher M. Wells

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	value of any pro	pperty	Date payment or transfer was made	Amount of payment					
	Bruce W. White, P.C. (VA Bar No. 19840) 8550 Mayland Drive Suite 206 Henrico, VA 23294 Henrico, VA 23294 brucewwhite@gmail.com	Attorney Fees a Court Filing Fe Credit Report:	e: \$313	159	June, 2020	\$1,500.00					
	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.										
	■ No										
	Yes. Fill in the details.										
	Person Who Was Paid Address	Description and transferred	value of any pro	Date payment or transfer was made	Amount of payment						
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.										
	Person Who Received Transfer Address Person's relationship to you		property transferred pa		e any property or ts received or debts exchange	Date transfer was made					
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-protessor) No Yes. Fill in the details.		ny property to a	self-settled t	rust or similar device o	of which you are a					
	Name of trust	Description and	value of the pro	perty transfe	rred	Date Transfer was made					
Par	8: List of Certain Financial Accounts, Insti	ruments, Safe Deposi	t Boxes, and St	orage Units							
20.	Within 1 year before you filed for bankruptcy,	were any financial ac	counts or instr	uments held	in your name, or for yo	our benefit, closed,					
	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa ■ No □ Yes. Fill in the details.				shares in banks, credit	unions, brokerage					
		ast 4 digits of account number			Date account was losed, sold, noved, or ransferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed fo	r bankruptcy, aı	ny safe depos	sit box or other deposi	tory for securities,					
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		e contents	Do you still have it?					

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Debtor 1 Christopher M. Wells

Case number (if known)

22.	Have you stored property in a storage unit or p	lace other than your home within	1 year before you filed for bankruptcy	?
	□ No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
	Genito Mini Storage Milothian, VA	Debtor	business papers	□ No ■ Yes
Par	19: Identify Property You Hold or Control for	Someone Else		
	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Inform	nation		
For t	he purpose of Part 10, the following definitions	s apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun	- ·	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	substance,
Repo	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	y release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	·	rironmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title	Court or agency	Nature of the case	Status of the
	Case Number	Name Address (Number, Street, City, State and ZIP Code)	. Idad of the date	case

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Debtor 1 Christopher M. Wells

Case number (if known)

Par	t 11: Give Details About Your Business or	Connections to Any Business			
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have any o	f the following connections to any business?		
	■ A sole proprietor or self-employed in	n a trade, profession, or other activity, eitl	ner full-time or part-time		
	☐ A member of a limited liability comp	any (LLC) or limited liability partnership (LLP)		
	☐ A partner in a partnership				
	☐ An officer, director, or managing exc	ecutive of a corporation			
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation			
	☐ No. None of the above applies. Go to P	Part 12.			
	Yes. Check all that apply above and fill	in the details below for each business.			
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.		
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed		
	Trigger Happy Firearms	Sales of Fireams and ammo	EIN:		
	11302 Hull Street Road Midlothian, VA 23112		From-To 2020 to present		
	Midiotilian, VA 23112				
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to a	nyone about your business? Include all financial		
	■ No □ Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			

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Debtor 1 Christopher M. Wells Case number (if known)

Part 12: Sign Below	
are true and correct. I understand th	nent of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers making a false statement, concealing property, or obtaining money or property by fraud in connection nes up to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Christopher M. Wells	
Christopher M. Wells Signature of Debtor 1	Signature of Debtor 2
Date July 1, 2021	Date
Did you attach additional pages to Y ■ No □ Yes	r Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someon ■ No	who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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United States Bankruptcy Court Eastern District of Virginia

In re	Christopher M. Wells		Case No.	
		Debtor(s)	Chapter	13

	IN A CHAPTER 13 CASE		
	(for use in the Richmond Division	only)	
1.	. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the compensation paid to me, for services rendered or to be rendered on behalf of the debbankruptcy case is as follows:		
	For legal services, I have agreed to accept	\$	5,484.00
	Prior to the filing of this statement I have received	\$	1,159.00
	Balance Due	\$	4,325.00
2.	2. \$_313.00_ of the filing fee has been paid.		
3.	3. The source of the compensation paid to me was:		
	■ Debtor □ Other (specify)		
4.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify)		
5.	I have not agreed to share the above-disclosed compensation with any other person un	less they are n	nembers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who copy of the agreement, together with a list of the names of the people sharing in the co		
6.	i. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of Bankruptcy Rule 2016-1(C)(3).	of the bankrup	cy case, as required by Local
7.	I am electing to request compensation and reimbursement of expenses in this case:		
	a. ■ In accordance with the "no-look" fee set forth in Local Bankruptcy Rule 2016-1	(C)(1)(a) and (C)(3)(a).
	b. \square By submitting applications for compensation in the manner set forth in Local Ba	inkruptcy Rule	2016-1(C)(1)(c)(ii).
	An attorney for the debtor that fails to make the election to request compensation purs (C)(3)(a) at the commencement of the case will be deemed to have elected to request a Bankruptcy Rule 2016-1(C)(1)(c)(ii).		

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CERTIFICATION

I certify that the foregoing is an accurate statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

July 1, 2021		
Date		

/s/ Bruce W. White

Bruce W. White

Signature of Attorney

Bruce W. White, P.C. (VA Bar No. 19840)

Name of Law Firm 8550 Mayland Drive Suite 206 Henrico, VA 23294

(804) 288-4328 Fax: (804) 288-4329

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

July	1, 2021		
Date			

Is/ Bruce W. White
Bruce W. White
Signature of Attorney

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Fill in this inforr	nation to identify your case:
Debtor 1	Christopher M. Wells
Debtor 2 (Spouse, if filing)	
United States E	Bankruptcy Court for the: Eastern District of Virginia
Case number (if known)	

Che	k as directed in lines 17 and 21:
l	cording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:	Calculate Your Average Monthly Income
rait I.	Calculate roul Average Monthly income

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - ☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

٥	pouses own the same remai property, put the moonie nom that	property	111 0110 001	anni only. Il you il	iave ne	tiling to report for	arry line, write we in the sp	acc.
					Colui Debt		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissi	ons (before all	\$	1,091.00	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e payme	ents from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pof you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spouyou listed on line 3.	r t. Includ ld, your o	e regula: depende	contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	ırm \$ _	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Total average monthly income Total average monthly income	ebtor 1	Christopher M. Wells			Case numbe	r (<i>if known</i>)			
Interest, dividends, and royatins Source S							Debtor 2 o		
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you. \$ 0.00 For your spouse 9. Pension or retriement income. Do not include any amount received that was a benefit under the Social Security Act. Islo, except as stated in the next sentence, do not include any compensation, pension, pay, amulty, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retird pay pold under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retirde pay to which you would otherwise be entitled if retired ander any provision of title 10 other than chapter 61 of that title.	7. Int	erest, dividends, and royalties			\$	0.00	\$		
the Social Security Act. Instead, list it here: For your spouse For your spouse \$ Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combact related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 5 of the 10, then include that psy only to the extent that it pays paid under chapter 6 of the 10, then include that psy only to the extent that it pays paid under chapter 6 of the 10, then include that psy only to the extent that it pays paid under chapter 6 of the 10 the 1	3. U n	employment compensation			\$	0.00	\$		
Pension or retriement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retried pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retried pay to which you would otherwise be entitled if retried under any provision of title 10 other than chapter 61 of that title. On the composition of title 10 other than chapter 61 of that title. Social Security Act, payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Social members of the uniformed services. If necessary, list other sources on a separate page and put the total for Column A to the total for Column B. 1,091.00 \$			e amount received was a benef	fit under					
Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, persion, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total for Column A to the total for Column B. Total amounts from separate pages, if any.		For you	\$0.	00					
benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, persion, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury of disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 0.00	I	For your spouse	\$						
Do not include any benefits received under the Social Security Act, payments made under the Rederal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the cornoavirus disease 2019 (COVID-19); payments received as a victime of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Social amounts from separate pages, if any.	9. Pe bei not Un dis pay	nsion or retirement income. Do not include the social Security Act. Also, except include any compensation, pension, pay, a sited States Government in connection with a sability, or death of a member of the uniformity paid under chapter 61 of title 10, then includes not exceed the amount of retired pay to very	le any amount received that wa cept as stated in the next sente innuity, or allowance paid by the a disability, combat-related inju- ed services. If you received any ude that pay only to the extent the which you would otherwise be e	nce, do e ry or y retired that it	\$	0.00	\$		
Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 11. Oalculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: 14. You are not married. Fill in 0 below. 15. You are married and your spouse is filling with you. Fill in 0 below. 16. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. 16. If this adjustment does not apply, enter 0 below. 17. Total 18. Total 19. 1,091.00 19. 1,0	Do und con crin con Go dea	onot include any benefits received under the der the Federal law relating to the national eder the National Emergencies Act (50 U.S.C ronavirus disease 2019 (COVID-19); paymeme, a crime against humanity, or internation mpensation, pension, pay, annuity, or allowabvernment in connection with a disability, corath of a member of the uniformed services.	e Social Security Act; payments emergency declared by the Presc. 1601 et seq.) with respect to ents received as a victim of a wall or domestic terrorism; or ance paid by the United States mbat-related injury or disability,	s made sident the ar					
Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: 14. You are married and your spouse is filling with you. Fill in 0 below. 15. Calculate the marited and your spouse is not filling with you. 16. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. 16. If this adjustment does not apply, enter 0 below. 17. Total 18. 0.00 19. Oopy here=> 19. 1,091.00 19. 1,091.0					\$	0.00	\$		
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Sample Sampl					\$	0.00	\$		
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Total average monthly income \$ 1,091.00 + \$		Total amounts from separate pages, i	f any.		\$	0.00	\$		
\$ 1,091.00 Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$	ea	ch column. Then add the total for Column A	to the total for Column B.	\$	1,091.00	+ \$ _			
You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$ 0.00 Copy here=> - 0.1								\$	1,091.00
 You are married and your spouse is filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$	13. Ca	Ilculate the marital adjustment. Check one) :						,
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You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$ \$ \$ Total \$ 0.00 Copy here=> 1,091.00 Calculate your current monthly income for the year. Follow these steps:		You are married and your spouse is filing	with you. Fill in 0 below.						
Total \$ 0.00 Copy here=> - 0.0 \$ 14. Your current monthly income. Subtract line 13 from line 12. \$ 1,091.00		You are married and your spouse is not fi Fill in the amount of the income listed in li dependents, such as payment of the spouselow, specify the basis for excluding this adjustments on a separate page.	iling with you. ine 11, Column B, that was NO use's tax liability or the spouse's s income and the amount of inc	s suppoi come dev	rt of someon voted to each	e other th n purpose	an you or you	r depend	lents.
Total \$ 0.00 Copy here=> - 0.0 \$ 1,091.00 5. Calculate your current monthly income for the year. Follow these steps:				\$		_			
Total \$ 0.00 Copy here=> - 0.00 4. Your current monthly income. Subtract line 13 from line 12. 5. Calculate your current monthly income for the year. Follow these steps:						_			
4. Your current monthly income. Subtract line 13 from line 12. \$ 1,091.00 5. Calculate your current monthly income for the year. Follow these steps:				+\$					
5. Calculate your current monthly income for the year. Follow these steps:		Total		\$	0.0	<u>0</u> c	ppy here=>		0.0
	4. Y	our current monthly income. Subtract line	e 13 from line 12.					\$	1,091.00
15a Conv line 14 here=> \$ 1,091.00			r the year. Follow these steps:	:					1,091.00

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Debtor 1	Christopher M. Wells	Case number (if known)	
	Multiply line 15a by 12 (the number of months in a year).		x 12
15	o. The result is your current monthly income for the year for this pa	irt of the form	\$13,092.00

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Debte	or 1	Chris	topher M. Wells		Case number (if known)		
16	. Cal	culate t	he median family income that applies to y	'ou. Follow these:	steps:		
			he state in which you live.	VA			
			-		_		
			he number of people in your household.	3	_		
	16c	To find	he median family income for your state and a I a list of applicable median income amounts tions for this form. This list may also be avai	, go online using t	he link specified in the separate	\$_	98,253.00
17	. Hov	do the	e lines compare?				
	17a	. •	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
	17b		Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	llation of Your Di			
Par	t 3:	Calc	ulate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Cop	y your	total average monthly income from line 1	1.		\$	1,091.00
19.	con	end tha	marital adjustment if it applies. If you are it calculating the commitment period under 1 come, copy the amount from line 13.				
			narital adjustment does not apply, fill in 0 on	line 19a.		- \$	0.00
	19b	Subtra	act line 19a from line 18.			\$	1,091.00
20.	Cal	culate y	our current monthly income for the year.	Follow these step	os:		
	20a	. Copy I	ine 19b			\$_	1,091.00
		Multipl	y by 12 (the number of months in a year).			3	c 12
		·					
	20b	. The re	sult is your current monthly income for the you	ear for this part of	the form	\$_	13,092.00
	20c	Copy t	he median family income for your state and	size of household	from line 16c	\$_	98,253.00
	21.	How d	lo the lines compare?				
			ine 20b is less than line 20c. Unless otherwine in a signification of the interval in a significant in the s	se ordered by the	court, on the top of page 1 of this form, ch	neck box 3,	The commitment
			ine 20b is more than or equal to line 20c. Un ommitment period is 5 years. Go to Part 4.	less otherwise ord	ered by the court, on the top of page 1 of	this form, cl	heck box 4, The
Par	t 4:	Sign	Below				
		_	nere, under penalty of perjury I declare that t	he information on	this statement and in any attachments is	true and cor	rect.
,	(Isl	Chris	topher M. Wells				
•	Cł	ristop	her M. Wells of Debtor 1				
	•		1, 2021				
		MM /	DD / YYYY				
	If yo	u check	xed 17a, do NOT fill out or file Form 122C-2.				
	If yo	u check	ked 17b, fill out Form 122C-2 and file it with t	his form. On line 3	9 of that form, copy your current monthly	income fron	n line 14 above.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$24	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$33	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
_	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Absolute Resolutions 22079-KLP Doc 1 Filed 07/01/21 Entered 07/01/21 13:06:17 Desc Main Document Page 50 of 50

Attn: Bankruptcy

8000 Norman Center Dr #350

Bloomington, MN 55437

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital OneBank, NA c/o Glasser and Glasser Box 3400 Norfolk, VA 23514

Dicks Sporting Goods Synchrony Bank P.O. Box 530916 Atlanta, GA 30353

Kohls/Capital One Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201

Nationwide Recovery Sys (James River) 501 Shelley Drive Suite 300 Tyler, TX 75701

Patriot Building, Inc. 2600 Roy Arnold Road Murfreesboro, TN 37130

Synchrony Bank P.O. Box 960061 Orlando, FL 32896